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APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		3	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/585,361 07/06/2006 Andreas Mroncz MRONCZ ET AL-1 PCT 2483 TITLE OF INVENTION: DEVICE FOR TREATING BLADDER-EMPTYING DYSFUNCTIONS OF A HUMAN							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$755	\$300	\$0 	\$1055	06/24/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS	]			
TREYGER, ILYA Y		3761	604-544000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to agents OR, alternate (2) the name of a sing registered attorney or 2 registered patent att listed, no name will be	te of a single firm (having as a member a automey or agent) and the names of up to patent attorneys or agents. If no name is agent will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Medi-Globe GmbH  Rohrdorf-Achenmuehle, Germany							
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5. Change in Entity Statu  a. Applicant claims	SMALL ENTITY status	See 37 CFX 1.27	☐ b. Applicant is no le	onger claiming SMAI	LL ENTITY status. See 37 C	CFR 1.27(g)(2).	
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